Division of Corporator

Corporator

Page-Lof 2

Flexida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140000460623)))



H140000460623ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.

Account Number: 073222003555 Phone: (561)686-3307 Fax Number: (561)471-0894

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one omail address please.\*\*

Enail Address: bmann@nasonylager.com

4 FEB 25 PM 4: 4 SECTION OF STATE ALLAHASSEE, FLORID

FLORIDA LIMITED LIABILITY CO.

Diagnostics Owner, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

2.14 FEB 25 AN 8 01
SLONG DATE OF DATE
TALL ANASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

2/25/2014

N MANAGER FEB 26

2014 FEB 25 AM 8: 01

SEGNETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLES OF ORGANIZATION

OF

### DIAGNOSTICS OWNER, LLC

I, the undersigned authorized representative of the Members, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

### ARTICLE I NAME

The name of this limited liability company is:

DIAGNOSTICS OWNER, LLC

## ARTICLE II ADDRESS

The street address and mailing address of the principal office is:

2328 10<sup>TH</sup> Avenue N., Suite 302 Lake Worth, FL 33461

# ARTICLE III CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

The name and the Florida street address of the registered agent and office are:

John White II 1645 Palm Beach Lakes Blvd. Suite 1200 West Palm Beach, Florida 33401 Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

John White II, Registered Agent

### ARTICLE IV MANAGEMENT

The powers of the limited liability company shall be exercised by or under the authority of, and the business and affairs of the limited liability company shall be managed under the direction of, its Managers and is, therefore, a manager-managed company.

John White II, Authorized Representative of the

Menucrs

H:\10078\22911\DArticlesOfOrganizationDiagnosticsOwnerBMM.docx/jha.bmm